

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO.	FILING DATE		
						APPLICANT(S)			
						CLAIMS			
	AS FILED	AFTER 1ST AMENDMENT	AFTER 2ND AMENDMENT			IND	IND	IND	IND
	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND
1						51			
2						52			
3						53			
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45						95			
46						96			
47						97			
48						98			
49						99			
50						100			
TOTAL IND.						TOTAL IND.			
TOTAL DEP.						TOTAL DEP.			
TOTAL CLAIMS						TOTAL CLAIMS			

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE  
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